Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	·	Report Filed B (Mark X)	By Candida	ite 🗸	Committee	X	Lobbyist
Name of Filing Committee, Can Lobbyist	didate or	FRIENDS OF MEI	LVIN WITHERSPO	ON	•	14-2	,
Street Address		PO BOX 1171				_	
City ERIE			State	PA	Zip Code	16512	
Type of Report (Place x under re	port type)						
■ 0.5 to		4-6 th Tuesday Pre-Election	5- 2 nd Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
263 2 1 3 part 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2			X				
Date Of Election (MM/DD/YYYY)	11/5/2019	Year	2019	Amendment Report		Termination Report	
	From Date	To Date			For	Office Use Only	
Expenditures	06/11/19	10,	/21/2019				
A. Amount Brought Forward Fro	om Last Report	\$	1928.92			31 x 32 35 1 135 2 35 y 40 13	
B. Total Monetary Contribution (From Schedule I)	s and Receipts	\$ 1	1265.00			5	600 1000
C. Total Funds Available (Sum of Lines A and B)		\$	3193.92			المدة المما 	교 등 의
D. Total Expenditures (From Schedule III)		\$	1826.47				N
E. Ending Cash Balance (Subtract Line D from Line C)		\$ 1	1367.45				R OF
F. Value of In-Kind Contribution (From Schedule II)	s Received	\$	E			TRATION	
G. Unpaid Debts and Obligation (From Schedule IV)	S	\$		=		5	CO CIT
<u> </u>			Affidavit Sec	ction		.	
Part 1- If this is a Committee report, I swear (or affirm) that this report, in					an and haliaft	us correct and comple	+0
Sworn to and subscribed before me		ilea scriedales on	paper, is to the	best of my knowled	ge and benefit	ue, correct and comple	ie,
At day of DONBER	_20_/9	- '1	\$	2 congo	-Wel	<u> </u>	<u> </u>
James Juli	trov			Signature	of Person Subm Subm Printed Nam	oitting report	- .
My Commission expires 2 - 3	2-23	Commonwealth	of Pennsylvania - WATSON - Notary	Mother Seal	2	18-855	7
MO.	DAY YR.	Ī	Erie County A	rea Code	Day	time Telephone Numbe	er
Part II- If this is a report of a Candida		Committee, candi	alle shall sigiffle	re.1			
I swear (or affirm) that to the best of amended.	my knowledge a	ind belief this poli	tical committee i	nas not violated any	provisions of t	he Act of June 3, 1937 (P.L. 1333, NO.320) as
Sworn to and subscribed before me t	this		-	11 -	(1)	J	
ay of OCTUBER	20 19	- '1		Jepvin,	Wish	enper	_
James Signature	tion			1,51012	ature of Candio UNIV Printed Name	Merspoor)
My Commission expires 2 - 2	2- 23 г.	Commonwealth of	Pennsylvania - No	CT (7)	Timed Name	46-685	54
	DAY YR.	LAURIE A WA	TSON - Notary Put ie County	rea Code	Dayt	ime Telephone Number	 1
		My Commissio	n Expires Feb 2, 2 n Number 128835	1023			<u>.</u> .

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer Identification Number	
1.Uniternized Contributions and Receipts-\$50.00 or Less per Contributor	
Total for the reporting period (1)	\$ 470.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	
Contributions Received from Political Committees (Part A)	\$ 250.00
All Other Contributions (Part B)	\$ 545.00
Total for the reporting period (2)	\$ 795.00
3. Contributions Over \$250.00 (From Part C and Part D)	
Contributions Received from Political Committees (Part C)	\$ 0.00
All Other Contributions (Part D)	\$ 0.00
Total for the reporting period (3)	\$ 0.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)	
Total for the reporting period (4)	\$ 0.00
Total Monetary Contributions and Receipts during this reporting period (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report	\$

Cover Page, Item B)

1265.00

PART A

Contributions Received From Political Committees

\$50.01 TO \$250.00 Use this Part to itemize only contributions received from Political Committees with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Filer Identification	n Number					
e america de la lace	Construction on the Total Construction					Amount
Full Name of Co	ntributing			Date [MM/DD/YYYY]	\$	
Committee	ERIE FIRE	EFIGHTERS PAC		08/05/2019		250.00
House #	Street Address	,		Date [MM/DD/YYYY]	\$	
		PO BOX 3576				
City ERIE	<u>.</u>	State PA	Zip Code 16508	Date [MM/DD/YYYY]	\$	
Full Name of Co	ntributing			Date [MM/DD/YYYY]	\$	
Committee					\$\frac{37}{20} \righta	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
		2.3 (1.4 2 (1.4)				
Full Name of Cor Committee	ntributing			Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
1986 (1971) - 1991 1866 (1971) - 1991	And the second]	
City	Harris St. Harris	State	Zip Code	Date [MM/DD/YYYY]	\$	
656/3 7 156/3 7 156/3 7	1]	
Full Name of Cor Committee	ntributing			Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
						1
City		State	Zip Code	Date [MM/DD/YYYY]	\$	<u> </u>
						1
Full Name of Con	itributing			Date [MM/DD/YYYY]	\$	·
Committee			,		100	ı
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Con Committee	ntributing	<u>r + 4 </u>	1	Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City-		Charles	Tin Cod-	Data fassalms han-a		
City		State	Zip Code	Date [MM/DD/YYYY]	\$	

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:		

Full Name of Contributor			4n
		Date [MM/DD/YYYY]	\$
DANNY & ANG	GELA JONES	09/01/2019	250.00
House # Street Address		Date [MM/DD/YYYY]	*
527	V 7TH STREET		
City	State Zip Code	Date [MM/DD/YYYY]	\$
ERIE	PA 16502	Žu Su	
Full Name of Contributor		Date [MM/DD/YYYY]	\$
SKY'S THE LIM	шт	09/01/2019	45.00
House # Street Address		[22]	\$ \$
表现是在1989	SOYER ROAD	A compared to the contract of	
City	State Zip Code	Date [MM/DD/YYYY]	
ERIE	PA 210-000 16511	Date IAIM/DD/11111	
Full Name of Contributor	Page 500 Arrest Treats	Date [MM/DD/YYYY]	(A)
RUBEYE JENKI	NS-HUSBAND		50.00
		09/01/2019	
House # Street Address 2226	PROSPECT AVE	Date [MM/DD/YYYY]	
	ROSPECT AVE		
City	State Zip Code	Date [MM/DD/YYYY]	
ERIE	PA 16510		<u> </u>
	- 「特別的報告」	\$\frac{\partial \text{2}}{\partial \text{2}}	
Full Name of Contributor		Date [MM/DD/YYYY] ;	
Full Name of Contributor CHARLES NELS	[North And	Date [MM/DD/YYYY] 5 10/15/19	50.00
	SON		50.00
CHARLES NELS House # Street Address	ON 9TH STREET	10/15/19	50.00
House # 646 Street Address	√ 9TH STREET	10/15/19 Date [MM/DD/YYYY]	50.00
CHARLES NELS House # Street Address	V 9TH STREET	10/15/19	50.00
House # Street Address v 646 v City	V 9TH STREET State Zip Code	Date [MM/DD/YYYY] S	50.00
House # 646 Street Address v City ERIE	State PA Zip Code 16502	Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$	50.00
CHARLES NELS House # 646 Street Address V City ERIE Full Name of Contributor TIMOTHY WAT	State PA Zip Code 16502	Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] 10/15/19	50.00
House # Street Address ERIE Full Name of Contributor House # Street Address	State PA Zip Code 16502	Date [MM/DD/YYYY] \$ Date [MM/DD/YYYY] \$	50.00
CHARLES NELS House # 646 Street Address V City ERIE Full Name of Contributor TIMOTHY WAT House # 646 Street Address	State PA 2ip Code 16502 ISON	Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] 10/15/19 Date [MM/DD/YYYY] \$ 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	50.00
House # Street Address ERIE Full Name of Contributor House # Street Address	State PA 2ip Code 16502	Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] 10/15/19	50.00
CHARLES NELS House # 646 City ERIE Full Name of Contributor TIMOTHY WAT House # 646 City ERIE ERIE	State PA 2ip Code 16502 TSON 77TH STREET State Zip Code	Date [MM/DD/YYYY] S	50.00
House # 646 Street Address Full Name of Contributor House # 646 Street Address TIMOTHY WAT City. ERIE Full Name of Contributor	State PA Zip Code 16502 TSON 77TH STREET State PA Zip Code 16502	Date [MM/DD/YYYY] S	50.00
CHARLES NELS House # 646 City ERIE Full Name of Contributor TIMOTHY WAT House # 646 Street Address V City ERIE DWANE BROCK	State PA Zip Code 16502 TSON 77TH STREET State PA Zip Code 16502	10/15/19 Date [MM/DD/YYYY] Date [MM/DD/YYYY] 10/15/19 Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] 10/15/19	50.00
House # 646 Street Address Full Name of Contributor House # 646 Street Address Full Name of Contributor ERIE Full Name of Contributor DWANE BROCK House # Street Address	State PA Zip Code 16502 TSON 77TH STREET State PA Zip Code 16502	Date [MM/DD/YYYY] S	50.00
House # 646 Street Address Full Name of Contributor House # 646 Street Address Full Name of Contributor TIMOTHY WAT TIMOTHY WAT TIMOTHY WAT TO STREET Address WATER ADDRESS OF THE STREET ADDR	State PA Zip Code 16502 TSON 77TH STREET State PA Zip Code 16502	10/15/19 Date [MM/DD/YYYY] Date [MM/DD/YYYY] 10/15/19 Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] 10/15/19	50.00
House # 646 Street Address Full Name of Contributor House # 646 Street Address Full Name of Contributor ERIE Full Name of Contributor DWANE BROCK House # Street Address	State PA Zip Code 16502 TSON 77TH STREET State PA Zip Code 16502	10/15/19 Date [MM/DD/YYYY] Date [MM/DD/YYYY] 10/15/19 Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] 10/15/19	50.00

PART C

Contributions Received From Political Committees

Over \$250.00

Use this Part to itemize only contributions received from Political Committees with an aggregate value over \$250.00 in the reporting period.

Filer Identification Number:

Red of				
Full Name of Contributing C	ommittee			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of Contributing Co	ommittee	by Assessment of	Total State Control	Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of Contributing Co	50.1.15			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City Full Name of		State	Zip Code	Date [MM/DD/YYYY] \$
Contributing Co	ommittee 			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of		1		Date [MM/DD/YYYY] \$
Contributing Co	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of Contributing Committee				Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$

All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part C)

Filer Identification Nu	mber:			·
Full Name of Contri	outor			Date [MM/DD/YYYY] :\$
House #	Street Address			Date [MM/DD/YYYY] \$
City	200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name				Occupation
Employer Mailing A Principal Place of Bu Full Name of Contril	ısiness			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name				Occupation
Employer Mailing A Principal Place of Bu Full Name of Contrib	siness			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name				Occupation
Employer Mailing Ac Principal Place of Bu	siness			(大学·李·特尔·李·英尔·英
Full Name of Contrib				Date [MM/DD/YYYY] \$
House #	Street Address		© ∀ €©¢ ≈ ≥vanos o4	Date [MM/DD/YYYY] \$
City Employer Name		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Mailing Ac Principal Place of Bu				

PART E

Other Receipts

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Filer Identification Num	ber:			
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		P. C. Santa		
Full Name	der en al. Men stad			
House #	Street Address	والمنافق وال		
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	77 1.0 71 - 71 72 - 72	198,, 7}	100000000000000000000000000000000000000	
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Street Address			
City W		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		part System 1 ()	James See See Tard	From 10 II

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Filer Identification Number:			
1. UNITEMIZED IN-KIND CONTRI	BUTIONS RECEIVED-VA	UE OF \$50.00 OR LESS PER CONTRIB	UTOR
TOTAL for the reporting period	(1)	. \$	
2, IN-KIND CONTRIBUTIONS REC	EIVED-VALUE OF \$50.0	TO \$250.00 (FROM PART F)	
TOTAL for the reporting period	(2)	\$	
3. IN-KIND CONTRIBUTION RECE	IVED-VALUE OVER \$250	.00 (FROM PART G)	
TOTAL for the reporting period	(3)	\$	
TOTAL VALUE OF IN-KIND CONTRIBUTIO PERIOD (Add and enter amount totals fr on Page 1, Report Cover Page, Item F)		'	

SCHEDULE II PART F

In-Kind Contributions Received

			VALUE OF \$50.01 TO \$250	y	
Filer Identification Numb	er:				
Beer Marie VIII of Partie of American Section 2015 (1997)	1,507514				
Full Name of Contribut	ior			Date [MM/DD/YYYY]	
House #	Street Address			Date [MM/DD/YYYY]	\$
City	· 56年等於[[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contrib	ution	 最後の数1.44.04%	Window District Advanta (*)		(critical)
Full Name of Contribut	OF			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	**************************************	State	Zip Code	Date [MM/DD/YYYY]	.
Description of Contribu	ation	46.26 120	MERCHANISH COLUM		[646]
Full Name of Contribut	OT		\	Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	<u>Parties de la companya de la compan</u>	State	Zip Code	Date [MM/DD/YYYY]	S
Description of Contribu	ition				
Full Name of Contribut	or			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	
Description of Contribu	ition				
Full Name of Contribut	Or			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	
City	sariak ya wa ya saraka ya ee a [State	Zip Code	Date [MM/DD/YYYY]	
Description of Contribu	tion				

SCHEDULE II Part G

In-Kind Contributions Received

			VALUE OVER \$250	,
Filer Identification	Number:			
新兴增强[[多年]]数。 				
Full Name of Con	itributor			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
			The second secon	
City		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name		//S/00/1		Occupation
	g Address / Principal	electric control of the control of t	8. P. F. 1	
Employer Mailing Place of Business				Description of
				Contribution
Full Name of Con	tributor			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name				Occupation
Employer Mailing Place of Business	g Address / Principal			Description of Contribution
Full Name of Cont	tributor			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City .		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name			The artists on the August Touris	Occupation
Employer Mailing Place of Business	: Address / Principal			Description of Contribution
Full Name of Cont	ributor	(A)4		Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
Gity	18 8 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name	STATE AND A STATE OF THE STATE	The second of th	Enter Chicago State (Chicago State (Occupation:
Employer Mailing Place of Business	Address / Principal			Description of Contribution

Statement of Expenditures

 Experience of the property of the		
는 중에 다른 사람들이 되는 보호를 하고 있는 것이 되었다. 그리고 있는 것이 되었다. [편집 전 기계		
Filer Identification Number:		

To Whom	Paid						Date [MM/DD/)	/YYY] \$	9-4
KEVIN ARRINGTON							09/23/2019	(#) 174	107.83
House #	1149	Street Address	WEST 10TH S	STREET			Description of E	xpenditur	e
City			State		Zip	•			
ERIE	Ē			PA	Code	16501	REIMB FOR GAS AN	D FOOD FO	RMEETING
To Whom	Paid -	MEGAN HOLMAN					Date [MM/DD/\	^^^] \$	
		IVIEGAN HOLIVIAN					09/25/19		114.00
House #	4019	Street Address	LONG	JUIEW	BUE		Description of E	kpenditure	
City Size PA Zip 16510					CAMPAIGN T-SHIRTS				
To Whom	C. C						Date [MM/DD/Y	YYY] \$	
MELVIN WITHERSPOON						09/25/19		100	
House #	£37	Street Address	23	06th 5			Description of Ex	cpenditure	e ga sanda kanan ka Kanan kanan ka
City	Si	منو	State	PA	Zip Code	16504	FOOD FOR MEETING	SS AND SUP	PLIES
To Whom		FRIE COLINEY BEN	D C D 4 T/C D 4 D	7.			Date [MM/DD/Y	YYY] \$	450.00
		ERIE COUNTY DEM	JCRATIC PAR	: I Y			09/25/19		160.00
House #		Street Address	PO BOX 1 1 84	ļ			Description of Ex	cpenditure	
City ERIE	Ē		State	PA	Zip Code	16501	TICKETS TO DINNER	10/19/2019)
			Own 100 m 100 m	1 .	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1		
To Whom i		MCI VIN WITHERED	DOM:				Date [MM/DD/Y	YYY] \$	27.54
To Whom		MELVIN WITHERSPO	OON		<u> </u>		10/05/19	海. 这	27.54
House # 8		Street Address	DON EAST 36TH ST	TREET	Exercises and different			海. 这	ő .
House #	332	Street Address		TREET PA	Zip Code	16504	10/05/19	penditure	ő .
House # 8	332 Paid	Street Address	EAST 36TH ST		Zip	16504	10/05/19 Description of Ex	(penditure G	
House # 8 City ERIE To Whom I	332 Paid	Street Address KEVIN ARRINGTON	EAST 36TH ST		Zip	16504	10/05/19 Description of Ex BREAKFAST MEETIN Date [MM/DD/Y 10/5/19	spenditure G	75.00
House # 8 City ERIE TO Whom I	332 Paid	Street Address KEVIN ARRINGTON Street Address	State State WEST 10TH S	PA	Zip Code	16504	10/05/19 Description of Ex BREAKFAST MEETIN Date [MM/DD/Y	spenditure G	75.00
House # 8 City ERIE To Whom I	Paid	Street Address KEVIN ARRINGTON Street Address	EAST 36TH ST	PA	Zip	16504	10/05/19 Description of Ex BREAKFAST MEETIN Date [MM/DD/Y 10/5/19	spenditure G	75.00
House # 8 City ERIE To Whom I	Paid 1149	Street Address KEVIN ARRINGTON Street Address	State WEST 10TH S State	PA TREET PA	Zip Code Zip Code	· · · · · · · · · · · · · · · · · · ·	Description of Ex BREAKFAST MEETIN Date [MM/DD/Y 10/5/19 Description of Ex	spenditure	75.00
House # 8 City ERIE To Whom I House # 1 City ERIE To.Whom I	Paid 1149	Street Address KEVIN ARRINGTON Street Address FRIENDS TO ELECT	State WEST 10TH S State	PA TREET PA	Zip Code Zip Code	· · · · · · · · · · · · · · · · · · ·	Description of Example 10/05/19 BREAKFAST MEETIN Date [MM/DD/Y 10/5/19 Description of Example 10/5/19 GAS Date [MM/DD/Y 10/8/19	G YYY] \$	75.00
House # 8 City ERIE To Whom I City ERIE To Whom I	Paid 1149	Street Address KEVIN ARRINGTON Street Address	State WEST 10TH S State	PA TREET PA	Zip Code Zip Code	· · · · · · · · · · · · · · · · · · ·	Description of Example 10/05/19 BREAKFAST MEETIN Date [MM/DD/Y 10/5/19 Description of Example 10/5/19 GAS Date [MM/DD/Y	G YYY] \$	75.00
House # 8 City ERIE To Whom I House # 1 City ERIE To.Whom I	Paid 1149	Street Address KEVIN ARRINGTON Street Address FRIENDS TO ELECT Street Address	State WEST 10TH S State	PA TREET PA	Zip Code Zip Code	· · · · · · · · · · · · · · · · · · ·	Description of Example 10/05/19 BREAKFAST MEETIN Date [MM/DD/Y 10/5/19 Description of Example 10/5/19 GAS Date [MM/DD/Y 10/8/19	G YYY] \$	75.00
House # 8 City ERIE To Whom I City ERIE To Whom I	Paid Paid Paid	Street Address KEVIN ARRINGTON Street Address FRIENDS TO ELECT Street Address	State State	PA TREET PA	Zip Code Zip Code	· · · · · · · · · · · · · · · · · · ·	Description of Ex BREAKFAST MEETIN Date [MM/DD/Y 10/5/19 Description of Ex GAS Date [MM/DD/Y 10/8/19 Description of Ex FUNDRAISER Date [MM/DD/Y	rpenditure YYY] \$ penditure	75.00
House # 8 City ERIE To Whom I City ERIE To Whom I City To Whom I	Paid Paid	Street Address KEVIN ARRINGTON Street Address FRIENDS TO ELECT Street Address DESANTIS SIGNS Street Address	State State State	PA TREET PA [CENTY E	Zip Code Zip Code	· · · · · · · · · · · · · · · · · · ·	Description of Expension of Exp	rpenditure YYY] \$ rpenditure YYY] \$ rpenditure	75.00
House # 8 City ERIE To Whom I City ERIE To Whom I City To Whom I	Paid Paid Paid	Street Address KEVIN ARRINGTON Street Address FRIENDS TO ELECT Street Address DESANTIS SIGNS Street Address	State State	PA TREET PA [CENTY E	Zip Code Zip Code	· · · · · · · · · · · · · · · · · · ·	10/05/19 Description of Ex BREAKFAST MEETIN Date [MM/DD/Y 10/5/19 Description of Ex GAS Date [MM/DD/Y 10/8/19 Description of Ex FUNDRAISER Date [MM/DD/Y 10/5/19	rpenditure YYY] \$ rpenditure YYY] \$ rpenditure	75.00 30.00 318.00

Statement of Expenditures

Filer Identification Number:			
	i		1
數量。自由是如今中心智能學的問題和自由的			

To Whom Paid		±		Date [MM/DD/YYYY] \$	
A State of the sta	NUOVA AURORA	CLUB		10/15/19 594.10	
House # 1518	Street Address	WALNUT STREET		Description of Expenditure	
City ERIE	(m)240 - m (4) - 32 (m) 25 (m)	State PA	FUNDRAISER		
To Whom Paid	MELVIN WITHERS	POON		Date [MM/DD/YYYY] \$ 300	
House #	Street Address		,	10/21/19 Description of Expenditure	
832		EAST 36TH STREET	Line during the L	Manager State of the Control of the	
City ERIE		State PA	Zip Code 16504	REIMB FOR SIGNS AND SHIRTS	
To Whom Paid				Date [MM/DD/YYYY] \$	
House #	Street Address			Description of Expenditure	
City		State	Zip Code		
To Whom Paid				Date [MM/DD/YYYY] \$	
House #	Street Address			Description of Expenditure	
City		State	Zip Code		
To Whom Paid				Date [MM/DD/YYYY] \$	
House #	Street Address			Description of Expenditure	
City		Staté	Zip Code		
To Whom Paid		-	, <u></u>	Date [MM/DD/YYYY] \$	
House #	Street Address			Description of Expenditure	
City		State	Zip Code		
To Whom Paid				Date [MM/DD/YYYY] \$	
House #	Street Address			Description of Expenditure	
City		State	Zip Code		
To Whom Paid				Date [MM/DD/YYYY] \$	
House #	Street Address			Description of Expenditure	
City		State	Zip Code		